

#01-003815

RECEIVED  
SEP 24 2001

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077  
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

29 JK  
9/24/01

**SECTION A - PROPERTY OWNER INFORMATION**

CITY OF INDIAN ROCKS BEACH  
BUILDING OWNER'S NAME: THOMAS SHAFER  
BUILDING DEPT.  
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 329 12TH. AVENUE  
CITY: INDIAN ROCKS BEACH STATE: FLORIDA ZIP CODE:  
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): Lot 2, Block 89, 2ND, ADDITION TO RE-REVISED MAP OF INDIAN BEACH PB. 23, PG. 72  
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.): RESIDENTIAL  
LATITUDE/LONGITUDE (OPTIONAL): HORIZONTAL DATUM: SOURCE:  GPS (Type):  USGS Quad Map  Other:

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: CITY OF INDIAN ROCKS BEACH 125117  
B2. COUNTY NAME: PINELLAS  
B3. STATE: FLORIDA  
B4. MAP AND PANEL NUMBER: 0004  
B5. SUFFIX: B  
B6. FIRM INDEX DATE: 3-2-83  
B7. FIRM PANEL EFFECTIVE/REVISED DATE: 3-2-83  
B8. FLOOD ZONE(S): A-11  
B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding): 10'

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe):  
B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe):  
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
Designation Date:

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

C1. Building elevations are based on:  Construction Drawings  Building Under Construction  Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.  
C2. Building Diagram Number 7 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)  
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO  
Complete items C3a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.  
Datum Conversion/Comments  
Elevation reference mark used SEE COMMENTS Does the elevation reference mark used appear on the FIRM?  Yes  No  
 e) Top of bottom floor (including basement or enclosure) 7.31 ft.(m)  
 b) Top of next higher floor 16.59 ft.(m)  
 c) Bottom of lowest horizontal structural member (V Zones only) N/A ft.(m)  
 d) Attached garage (top of slab) 7.31 ft.(m)  
 e) Lowest elevation of machinery and/or equipment servicing the building 12.31 ft.(m)  
 f) Lowest adjacent grade (LAG) 6.6 ft.(m)  
 g) Highest adjacent grade (HAG) 7.0 ft.(m)  
 h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade: 6  
 i) Total area of all permanent openings (flood vents) in C3h 2448 sq. in. (sq. cm)

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME: LAUREN R. PENNY LICENSE NUMBER: #4931  
TITLE: LAND SURVEYOR COMPANY NAME: L.R. PENNY & ASSOCIATES, INC.  
ADDRESS: 10730 103RD AVENUE NORTH CITY: SEMINOLE STATE: FL ZIP CODE: 33778  
SIGNATURE: Laura R. Penny DATE: 9-17-01 TELEPHONE: 727-398-4360

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

329 - 12TH. AVENUE

CITY

STATE

INDIAN ROCKS BEACH

FLORIDA

ZIP CODE

FOR Insurance Company Use	
Policy Number	
Company NAIC Number	

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

NORTH RIM OF MANHOLE OPPOSITE LOT 2, BLK. 89

@ S. SIDE OF ISLAND ELEV. = 5.59

PREVIOUSLY ESTABLISHED

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO and ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E3. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is [ ] ft.(m) [ ] in.(cm) [ ] above or [ ] below (check one) the highest adjacent grade.

E3. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? [ ] Yes [ ] No [ ] Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE

DATE

TELEPHONE

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

G1. [ ] The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. [ ] A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. [ ] The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER

G5. DATE PERMIT ISSUED

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

G7. This permit has been issued for: [ ] New Construction [ ] Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

Check here if attachments